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indicated unless correct maintenance fee notifica	ted below or directed otl ations.	nerwise in Block 1, by ((a) specifying a new						
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OLIFF & BER P.O. BOX 3208 ALEXANDRIA	2 1 2010	State	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
		THE THE	, sex or					(Depositor	's name)
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APPLICATION NO.	FILING DATE		FIRST NAMED INV	ENTOR		ATTO	RNEY DOCKET NO.	CONFIRMATION N	40.
10/584,471	08/31/2006		Makoto Ouc				128467	4077	
FITLE OF INVENTION	POLYLACTIC ACID		RESIN OF	CON		VOI	AND MO	LDED AR	TIC
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FE	E DUE	PREV. PAID IS	SSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0 99/28		\$1810 1 CHAMM1 0000005 5	11/04/2010 10584471	ł
EXAMINER		ART UNIT	CLASS-SUBCLASS			C:1501		1510.00 OP	l
BERNSHTEYN, MICHAEL		1796	526-317100)		C:1504		300.00 OP	
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	AND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (pri	nt or typ	ne)			- <u>-</u>	
PLEASE NOTE: Un recordation as set for	lless an assignee is ident th in 37 CFR 3.11. Com	ified below, no assigned pletion of this form is NO	e data will appear o DT a substitute for fi	n the pa	atent. If an as: assignment.	signee is id	lentified below, the d	ocument has been fi	led for
(A) NAME OF ASSI	(B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Toyota Jid	losha Kabushik	i Kaisha	Toyota,	Japa	n				
Please check the approp	riate assignee category or	categories (will not be p	orinted on the patent): 🚨	Individual	Corporati	on or other private gr	oup entity Gover	rnment
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a. Applicant claim	ntus (from status indicate ns SMALL ENTITY state	is. See 37 CFR 1.27.	b. Applicant is	s no long	ger claiming Si	MALL ENT	ΓΙΤΥ status. See 37 C	FR 1.27(g)(2).	
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September 21, 2010

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